

PART B - FEE(S) TRANSMITTAL

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7590

10/06/2004

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 North Point

901 Lakeside Avenue 11/29/2004 DEMMANU2 00000063 501432 1003831
 Cleveland, OH 44114

01 FC:1501 1370.00 DA
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Debra L. Pejeau

(Depositor's name)

Debra L. Pejeau

(Signature)

Nov. 23, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/038,314	10/19/2001	Jason T. Griffin	555255012227	7213

TITLE OF INVENTION: HAND-HELD ELECTRONIC DEVICE WITH MULTIPLE INPUT MODE THUMBWHEEL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$300	\$1670	01/06/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
OSORIO, RICARDO	2673	345-156000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Jones Day

2 Krishna K. Pathiyal

3 Robert Liang

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Research In Motion Limited

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Waterloo, Canada

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 10 (\$30)

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 501432 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

David B. Cochran

Date

11/4/04

Typed or printed name

David B. Cochran

Registration No.

39,142

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